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First Report

ON THE

DERBYSHIRE
COUNTY LUNATIC
ASYLUM.

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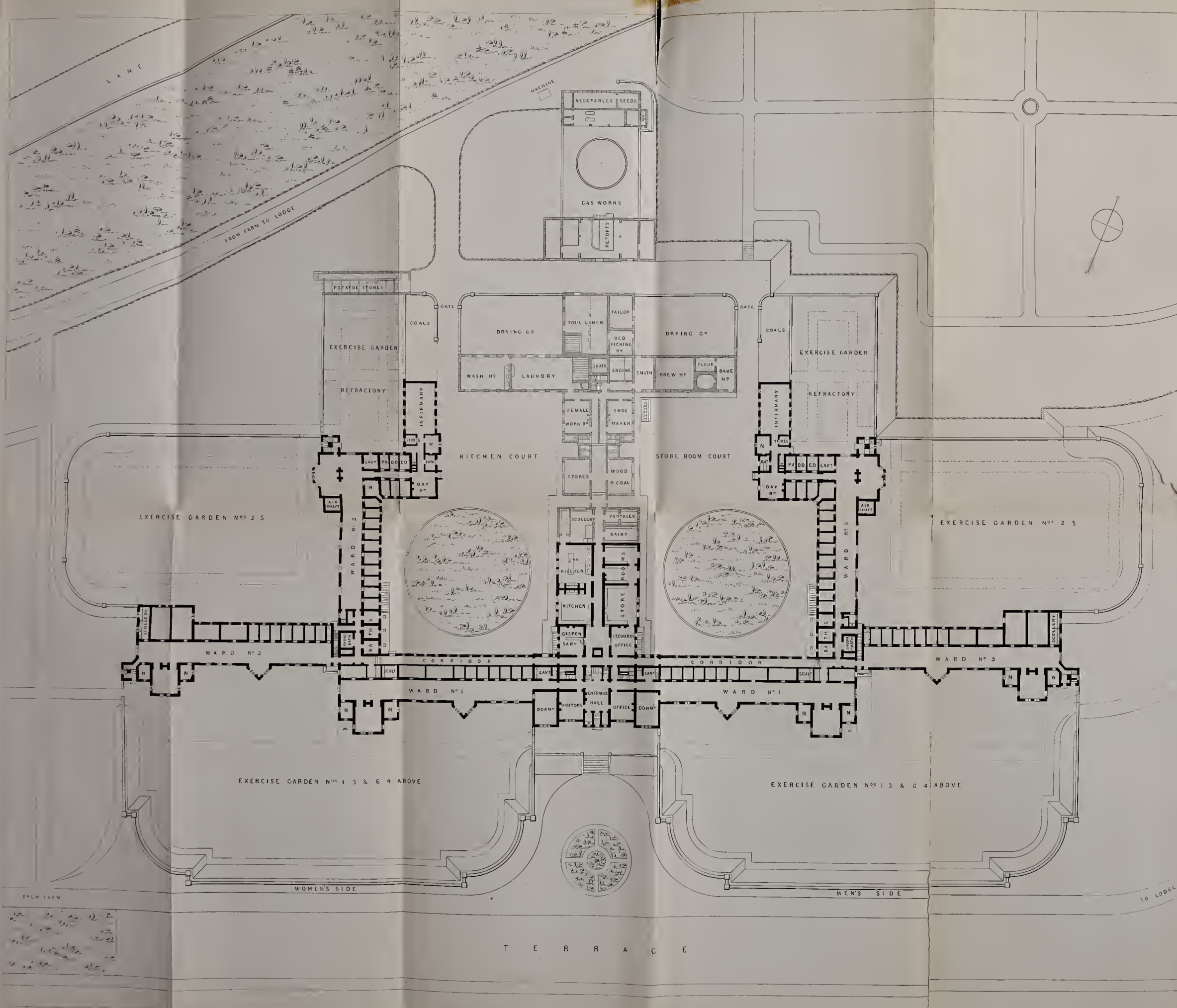
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THE UNIVERSITY OF CAMBRIDGE

HENRY DUFFSBURY, ARCHITECT. 1848.



First Report
OF
THE DERBYSHIRE
COUNTY PAUPER LUNATIC
ASYLUM.

Committee of Visitors.

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CHAPLAIN The REV. JOSEPH SOWTER.
CLERK AND STEWARD MR. LANGLEY.

JOHN BARBER,

CLERK OF THE PEACE.

DERBY :

W. AND W. PIKE, PRINTERS, CORN MARKET.

REPORT
OF THE
VISITING JUSTICES
OF THE
COUNTY LUNATIC ASYLUM.

*To the Justices of the Peace of the County assembled at their General
Quarter Sessions of the Peace on the 4th day of January, 1853.*

THE REPORT OF THE COMMITTEE OF VISITORS
OF THE COUNTY LUNATIC ASYLUM.

In making our first Annual Report we propose, as the best mode of conveying full information to the Court, to state in the first instance the general history of the undertaking, and to follow such general explanation by the Report of the Architect with respect to the construction, accommodation, and cost of the buildings and works, and to conclude with the Report of the Medical Superintendent on the capabilities, condition, and management of the Establishment, and on the state of the Patients under his care.

It will be in the recollection of the Court that the building of an Asylum was in contemplation so far back as the year 1844, and that at that time an estate consisting of 70 Acres of land at Micklcover, three miles from Derby, was bought, and designs were adopted and matured, and every preparation made to accept Tenders for the

Works. But having reason to expect the early appointment of a new Commission in Lunacy from which we might reasonably hope to obtain valuable advice and facilities for effecting more economical financial arrangements, especially with respect to the repayment of monies borrowed on the Security of the County Rates, we deemed it prudent to suspend our proceedings until the Commission should be appointed and we could have the benefit of acting with and under it. However, an impression then prevailed that a Lunatic Asylum might be erected for much the same cost as a Union Poor-house, the essential differences between the two Institutions, and the capacity, habits, and necessities of the inmates being considerably overlooked. The Plans submitted by us were the result of much and anxious consideration, of personal enquiry made by three members of our body who visited, for this special purpose, many of the best existing Asylums, and of the advice and assistance of one of the ablest and most distinguished managers of such Institutions. The Plans were, we believe, the first laid before the new Commissioners who made the general objection that the estimate was too high and the accommodation too great, but without stating or giving us any means of judging what in their opinion would be a proper estimate, or a proper number to be accommodated. This led to a long discussion, and correspondence, which ultimately terminated at the end of the year 1847, in the adoption, by the Commissioners, of a design essentially identical in principle with that first submitted to them, but with a reduction in the number of Patients to be accommodated from 360 to 300.

We make the foregoing statement to explain that it was not until the spring of the year 1848 that we were able to accept the Tender of Messrs. Thomas and Wm. Mansfield Cooper, of Derby, for the execution of the works, and we now have to report that the several works included in that Tender, together with sundry additional works have been performed, the building having, in fact, been partly used for the reception and treatment of Patients during the last eighteen months.

Although the subjoined Report of the Architect fully explains the details of the Buildings and the nature of the accommodation throughout, we think it due to the Architect, Mr. Duesbury, to state that this is the first building expressly designed in harmony

with the non-restraint and wisely humane system of treatment ; it is the first in which a Recreation Hall has been included, in which there have been provided private Corridors of communication to all the Wards, in which the cheerfulness, comfort, and warmth of the Patients' Galleries and Airing Grounds have been made an entirely primary consideration, and in which a complete system of ventilation by means of shafts (through which not only all the vitiated air is extracted, but into which all the smoke flues have been conducted) has been attempted and carried out with success.

We now wish to draw your attention to the accompanying statement of account and balance-sheet, by which it will appear that the cost of the building-works originally contemplated has been exceeded by a very trifling amount, and that the bulk of the additional expenditure arises from the cost of the Land, the Farm establishment with stock and implements, the formation and stocking of gardens, the formation of roads, the drainage of the estate (now containing 79 acres.) the planting of about four acres of land on the northern boundary as a screen, and the building of an additional Lodge, and of a boundary wall, nearly a mile long, round that part of the estate on which the buildings and gardens are situated, and which encloses an area of about 32 acres intended to be ultimately laid down in grass.

We are aware that we have done more extensive works, and provided far more ample and complete accessories than have usually been included in the first cost of the building, but mature deliberation has convinced us that the course we have adopted will, in the result, be economical, inasmuch as the interest on the first cost, which is to be liquidated by payments spread over a series of years, will be much less burdensome to Parishes, and to the rate-payers, than an increase in the weekly charge per head per patient, which increase would be unavoidable if the cost of such extra works and accessories was charged on the annual income.

It now only remains for us to request the attention of the Court to the accompanying comprehensive and lucid descriptive Report of the Architect, and the very able and interesting Report of the Medical Superintendent. We consider ourselves singularly fortunate in having secured for this Asylum the valuable services of

Dr. and Mrs. Hitchman. The happy union which they have displayed of benevolence, firmness, and skill, has in all cases greatly relieved, and, we believe, in every practicable instance cured, the sufferers placed under their management from the most dreadful form of human affliction, and has made useful and self-supporting members of society of those who would otherwise have become burdens to their fellow creatures, and have exhausted their lives in hopeless misery to themselves.

We have also much satisfaction in stating that the Commissioners in Lunacy have, on each occasion of their visit to the Asylum, expressed their entire approbation of the site and construction of the Building, and of its conduct and management, and that the like favourable opinion has been expressed by the Superintendents of other Asylums, by Medical Visitors, and by Guardians of Unions.

FRAS. HURT,

CHAIRMAN.

THE ARCHITECT'S REPORT.

*To the Chairman of the Visiting Justices appointed to superintend the
Erection of the Derby County Pauper Lunatic Asylum.*

SIR,

In making my final Report as Architect of your Asylum, I am aware that I am virtually reporting to the Court of Quarter Sessions, and therefore recapitulate information, which, although familiar to the Committee, is not in the possession of the Court or the public. I beg leave in the first instance to repeat so much of my first Report, presented in the year 1844, as relates to the general principle, or what may be called animus of the Design, as this general principle having remained unchanged, the description will still apply.

In that Report I say—"THE GENERAL ARRANGEMENT of an extended front in straight lines with wings at right angles, has been adopted as being the simplest, as affording the most direct communication, and as presenting the greater part of the Galleries, which are the living rooms of the Patients, to a southern aspect, by which their cheerfulness and comfort are best insured."

"In accordance with the instructions issued by the Committee, the whole of the Wards are obtained on two floors only. The building is divided into three Wards on each floor, on both sides, forming in all six separate and distinct Wards for Male Patients, and six for the Female—the females being to the West of the middle building."

"A Chapel, containing 200 sittings, and a large Hall are provided on the first floor, extending over the domestic offices. The Hall is intended to be used for the amusement and instruction of the Patients, when the weather, or the infirmities of the Patients themselves, will not admit of out-door exercise or employment."

“ It is to be observed that in most of the buildings hitherto erected for the purposes of Lunatic Asylums, the *approaches* to the several Wards have been through those adjoining, thus rendering the Wards generally *thoroughfares* for traffic of every description, to the great detriment of the sanitary and curative provisions intended to be afforded. And in those buildings in which the Wards have approaches independently of each other, another evil almost as great as the one mentioned is to be seen, which is, that from the radiating form of the plan, the majority of the galleries have unfavourable aspects, and look upon the backs of other Wards. To avoid the very great defect first mentioned without entailing the injurious arrangement last shown, in this design, a separate and distinct CORRIDOR OF COMMUNICATION at the back of the Wards immediately adjoining the middle building, on both floors, leading in a straight line to and from the juncture of the three Wards on each side, and affording the means of independent access to every Ward from the offices, airing grounds, and all parts of the Establishment, is provided.”

“ Accommodation for two Attendants is provided in each Ward, two being considered necessary for the allotted number of Patients, and the presence of one is at all times insured.”

“ Provision is made for taking the meals in the galleries; the parts allotted for this purpose are placed at a distance from the entrances that the comfort of the Patients may not be disturbed by noise and traffic; they have large windows and open fires. It has been a main object in forming this Design to render the galleries cheerful to the Patients, and easy of inspection to the Attendants; they are therefore made of ample width and are well lighted. All the galleries are arranged to have windows at the ends opposite the entrances, since a dark blank wall as a termination produces a depressing effect. A large bay window is also introduced in the middle of each to command a more extended view of the surrounding country. The galleries as well as the sleeping rooms have wooden floors.”

“ At that part of the building, on each side and on each floor, where the three Wards unite, three Baths are placed, so that they may either be used collectively for one Ward, or separately for each

as occasion may require, and being thus united they can be conveniently supplied from the heating vessel above."

"None of the staircases to be used by the Patients have open well holes, they being all bounded by solid walls and consisting of straight flights, without winders, having large landings. This is a point of great importance, as well hole staircases have been found dangerous and otherwise highly objectionable in buildings of this description."

"The AIRING GROUNDS, being considered essential to the advantageous treatment of the Patients, are here placed in front to enjoy as much as possible the cheerfulness and warmth of the southern aspect. Each Airing Ground (or Exercise Garden) is surrounded by a sunkwall having a ha-ha on each side."

"The aspects of the Galleries and the Building generally are shewn on the ground plan. The principal front inclines slightly to the east, so as to obtain as much as possible of the winter sun."

The above quotations, being still strictly applicable, are perhaps sufficient to shew that the Committee have not allowed any interference to vitiate their original views. I will now proceed to describe how these views have been carried out in the buildings and works now complete.

First the SITE.

The Asylum is situated about three quarters of a mile S.W. of the village of Mickleover, on an estate consisting of 79 acres of land, purchased by the County for the purpose of the Institution, and stands, with a southern aspect, on rising ground overlooking the rich valley of the Trent, and commanding a panoramic view of the wide spread country beyond, bounded in the extreme distance to the South, by the Charnwood hills, having Needwood to the West, and the flats of Nottinghamshire to the East—perhaps one of the most beautiful and varied views in the County. The property is approached from the Uttoxeter road by a pleasant lane, which forms its Northern boundary, and in which, at the N.E. angle of the estate, are the entrance gates with a lodge attached; a carriage drive, with turfed slopes, leads from these gates past the Eastern front, and along the

South terrace, which stretches across the property from East to West, to the CHIEF ENTRANCE in the centre of the Southern or principal front, the drive being continued forward to the Farm Building at the N.W. boundary. The Farm is also approached by a back road from the entrance lodge, which, skirting the plantation (about four acres in extent to the North), also affords access to the offices and back premises of the Establishment. A kitchen garden (containing about five acres) surrounds the building on the North, East, and West sides, and occupies the remaining space enclosed by the roads before mentioned. The site of the building and exercise gardens covers a space of $5\frac{1}{2}$ acres.

Having said these few words as to the site, I will proceed to describe the PLAN AND ACCOMMODATION OF THE BUILDING, as shown by the accompanying plan. To begin at the CHIEF ENTRANCE, which opens upon a paved terrace, approached by a broad flight of steps from the drive, and is in the centre of the Superintendent's and officers' residence, in the middle of the Southern front. On each side of the entrance lobby is a small room, the one to the left hand being a closet, the corresponding one a cloak room. The lobby leads into the ENTRANCE HALL, having on the right, the SUPERINTENDENT'S RECEPTION ROOM, and on the left the VISITORS' ROOM, or the room to which Patients are brought to see their friends and visitors, the room having a private approach from the corridor and patients' staircases. Next come the passages leading to the Wards No. 1, on each side, and to the patients' staircases, and beyond these at the end of the hall, is THE PRINCIPAL STAIRCASE leading to the SUPERINTENDENT'S DINING and DINING ROOMS, and the VISITORS' COMMITTEE ROOM on the first floor, as also to the upper Wards, through passages as on the ground floor, and to officers' and servants' bed rooms on the floors above. At the top of the four towers at the angles of this block of building (see the view) are four water tanks, two for hard water and two for soft, and capable of holding on the aggregate, 10,000 gallons. Again, descending the staircase, and passing through the lobby under the same, we are in the PRIVATE CORRIDOR OF COMMUNICATION, opening upon which, on the left hand, is the DISPENSARY, and on the right, the STEWARDS' OFFICE, each with a service window to the kitchen lobby. At the end of the lobby, next the corridor, is the smoke shaft, into which all the flues

from the Superintendent's residence or middle building, and from the kitchen offices, are conducted. Beyond the last named rooms, on the left, are the KITCHENS, with scullery and china closet adjoining. The FIRST KITCHEN is fitted with dressers, flour bins, &c., and has two large roasters and two open fires for dry cooking; in the SECOND KITCHEN are the stew-hearths, and five vessels (for water cooking) enclosed in one large vessel, containing boiling water under pressure, as a source of heat. The heating vessel for the general supply of hot water is in the SCULLERY, in which are also a plate-rack, sink, vegetable table, &c. &c.

In connection with, and beyond, the Steward's office on the opposite side of the centre passage are the STORE-ROOMS, the first for bedding, clothing, turnery, earthenware, &c.; the next for groceries and chandlery; and the third for bread, flour, meal, &c. Beyond the store-rooms, and opposite the scullery, are the DAIRY, LARDER, and PANTRY, all well ventilated from above.

I may here state that those portions of the Plan which are etched of a light tint are only one story high. Above the kitchens and the store-rooms are the CHAPEL and RECREATION HALL (both 24 feet x 52 feet by 24 feet high), which are approached by the upper corridor of communication, and have a lobby corresponding with the kitchen lobby below. The roof of this block of building is surmounted by a clock turret having a clock which strikes the hours and quarters, and has four dials.

Continuing along the office passage, on the ground floor, we pass the wood and store sheds, beyond which, as the Plan shows, the passage is divided into two,—that on the left leading to the offices in which women are employed—videlicet, the FEMALE WORK-ROOM, in which also is kept a stock of linen drapery, the LAUNDRY, with drying closet attached (the air-warmers being in the basement), and fitted with ironing tables, flat and italian ironing stoves, and a mangle. Adjoining the laundry is the GENERAL WASH-HOUSE, fitted with three boiling vessels, inserted into a vessel containing hot water, as a heating medium with a wash-wheel and a hydro extractor, or wringing machine (these last worked by the steam-engine), also with wash tubs, each supplied with hot and cold water, and with clothes bins, rinsing tubs, &c. &c. Passing from the wash-

house, across the DRYING GROUND, which is paved with Stafford bricks, and fitted with posts and zinc clothes wires, we enter the FOUL LINEN WASH-HOUSE, which has a drying closet, with some of the horses made to admit of beds, mattresses, or the stuffing of them being dried. The drying closets are supplied with fresh air by means of a shaft, the air, before passing through the closet, being raised to a high temperature by the apparatus in the basement. Here are also a wash-wheel and hydro extractor, with rinsing, soaking, and washing tubs supplied with hot and cold water; over this wash-house are two water tanks, for soft and hard water respectively, capable of containing 4,500 gallons each, for the supply of the whole of these back offices. Adjoining the foul-linen wash-house is the BED-PICKING and UPHOLSTERY-ROOM, having also a door into the drying ground on the male side; the taking to pieces and re-making of beds, picking horsehair, &c., are employments in which male patients may be employed; next the bed-picking room is the TAILORS' SHOP, as shown on the Plan. Going back to the double passage before mentioned, the one on the right hand leads to the offices in which men are employed, viz., the SHOEMAKERS' SHOP, beyond which, and adjoining the SHAFT (into which all the steam and vapour from the wash-houses and drying closets, and also the smoke flues from the gas-works, steam boilers and apparatus fires of these buildings, are conducted) is the ENGINE HOUSE, containing a steam engine, capable of being worked up to 15 horse power, and which is used for the pumping of water and the driving of the washing and brewing machinery—the steam boilers being in the basement under the foul-linen wash-house. Below the Engine-house is the WELL, 103 feet deep, having, when at rest, 53 feet of water. Adjoining the well is a soft water feeder, in communication with two tanks, under the store room, and kitchen courts respectively, into which tanks all the rain water from the roofs of the building is conducted. These tanks together are capable of containing 122,000 gallons, or 1,000 gallons per day for one-third of a year; they are made common to the feeder mentioned for the greater facility of pumping. Adjoining the engine-house, eastward, is the SMITHS' or PLUMBERS' SHOP; next which is the BREWHOUSE, fitted with a refrigerator, malt mill, and general brewing plant, and having cellars underneath with an external buttway. There is also a beer engine attached to the brewhouse, with a flexible hose, so that beer

may be drawn from any cask at pleasure. Beyond the brewhouse at the eastern end of this range of building is the **BAKEHOUSE**, with large oven and flour store attached.

Here the domestic offices of the Establishment end, the whole being within the two gates, which enclose the kitchen and store-room courts.

Outside the gates, and in a line northward, with the offices just described, are the **GAS WORKS**, consisting of a retort house, with coal and coke sheds attached. There are six retorts in settings of three, two, and one—the single retort to be used in Summer, when least gas is required, the other two settings as the demand increases. The gas holder, 31 feet diameter, is in the yard at the back of the retort house; and beyond that, at the further end of the yard, are the purifiers, with lime sheds attached, and the metre house. The works supply about 400 burners, including those at the Lodge, and at the Farm, as well as those on the external lamp posts, which extend from the Entrance Lodge along the carriage drive in front of the building, and through to the Farm. The small building shown at the back of the gas house is a **GARDEN HOUSE**, and contains a seed room, a vegetable room, supplied with hot and cold water, and fitted with a dresser, as a scullery; so that vegetables may be prepared here, and the main scullery relieved from the litter and dirt consequent on the process. A **WEIGHING MACHINE** house is at the end of this building, with the machine conveniently placed on the back road, to weigh all carts carrying stores, coals, &c.

Returning back to the main building through the kitchen court, we pass a **POTATO STORE**, at the back of the women's refractory exercise garden, partly sunk in the ground; it is divided into binns as shown on the Plan, and has a paved floor, with air channels below, and a honey-comb area round the external walls, that it may be as dry as possible. I may here state, so as to dismiss entirely this part of the subject, the kitchen garden is well drained, conveniently laid out with gravel paths—is well stocked, and supplied with water in tanks.

Having thus gone through the official and domestic appointments of the building, I will now describe the *arrangement* and *accommo-*

dation of the PATIENTS' WARDS and Exercise Gardens, premising that it is not necessary to describe more than one side, say the west, or women's side, as the arrangement is generally alike for both sexes.

To begin with the WARD No. 1, ground floor, which is approached from the entrance hall, in the middle building. This Ward provides accommodation for 25 Patients and two nurses, the sleeping rooms, opening upon the gallery, being at the back. At the entrance of the Ward is the lavatory, fitted with four earthenware basins, inserted into a Hopton stone slab, and supplied with hot and cold water. Plugs and chains are not used for emptying the basins, as they afford facilities for the Patients to do mischief, but each basin has a drain pipe with a fine grating at the top. There is a cock in the drain pipe, under each basin, which being turned, lets off the water into a general pipe trapped to the drain. All the parts are in sight and easily inspected or repaired. Adjoining the lavatory is a water closet, with an apparatus worked by the door, which admits neither more nor less than a given quantity of water to flow into the pan every time the door is used. Passing along the gallery we come to the bay window in the centre, which not only commands a variety of aspect, but affords a retreat out of the general traffic of the Ward. To add to cheerfulness it has a fire-place in the angle between the lights ; and at the far end of the gallery is a dining-room, with the rooms (marked N on the Plan) for the nurses on each side. This room has windows in front and at the sides, and has an open fire ; a corresponding open fire being at the back of this one in the gallery. Near the dining-room is the scullery, (marked scuy.) fitted with a sink, a plate rack, a small dresser enclosed beneath, and drawers for knives, spoons, &c. ; and in the passage leading to the corridor of communication is a wardrobe and store closet, to hold the attendants stock of bedding and clothing.

Leaving the Ward No. 1, we enter the "WARD JUNCTION," through the passage just described ; here are three baths and a shower bath, and also a staircase leading to the Upper Ward. The baths are supplied with hot and cold water from vessels in the roof, the hot water vessel being a double cylinder, the outer cylinder containing a "Jacket" of hot water, which heats the cold water in the inner cylin-

der, whence the supply is taken. The heating vessel is in the basement, between which and the "Jacket" a continuous circulation is maintained. The water supply is from the tanks, already described over the towers of the middle building.

Through the Ward Junction, and at right angles with the Ward No. 1, is the WARD No. 2. This Ward has none but single sleeping rooms, and is devoted to the dirty Patients, the accommodation being for 16. The sleeping room floors of this Ward are water proof, and have trapped communications with the soil drains, so that they can be well washed, and the labour of carrying away the dirty water is avoided.

The appointments in this Ward with respect to lavatory, scullery, nurses' rooms, &c., are similar to those in No. 1; they are marked on the Plan. But the windows in this Ward are guarded with wire work in wooden frames; to prevent, however, the wire work being too evidently "a guard," the space between it and the glass can be filled with flowers in pots, or used as cages. This Ward also has three padded rooms, shown on the Plan in the passage leading to the Infirmary. The walls, floors, and doors, of these rooms are padded with horse-hair in a waterproof covering. The INFIRMARY is at the end of these secluded Wards, and has a dry room, bath room, nurses' room, a store room, a water closet, and a dormitory, capable of holding 14 beds. Although called an "Infirmary," it is very questionable if this part of the Establishment will ever be used expressly in that sense, but it will be very useful on this, the female side, as what is sometimes called a "Laundry Ward" for the use of the women at work in the washing, &c., and on the corresponding or male side, for the men engaged in the workshops.

The remaining Ward (marked No. 3 on the Plan) has appointments corresponding to those described in No. 1. It affords accommodation for 27 Patients, and has a padded room, to be used on an emergency.

It will be noticed that every Ward has a staircase at each end to admit of more ready communication between the two floors. The staircases at the ends of the Wards Nos. 2 and 3 are for officers only.

As it is difficult to remember numbers when interspersed with

narrative, I have prepared the following Table of Accommodation, which will show at a glance the nature and extent of Patients' accommodation :—

Ground Floor Wards.	Class of Patients.	In single Rooms.	Associated.	Totals.	Upper Wards.	Class of Patients.
1	Convalescent.	7	18	25	6	Tranquil
2	Refractory.	16	0	16	5	Refractory
3	Aged and Infirm.	7	20	27	4	Orderly
On each floor on each side		30	38	68		
On both floors on both sides		120	152	272		
Add Infirmarys (14 each)			28	28		
Total accommodation		120	180	300	Patients.	

The whole of the Patients' Wards are of fire-proof construction, having brick arched ceilings and iron roofs. The middle building, or officers' residence, is not fire-proof, except as regards the passages and stair-cases; iron doors are used where the Wards communicate with this building. The floor of the chapel and hall is also of fire-proof construction.

I come now to a subject of the greatest importance in all Institutions inhabited by a number of people, *videlicet*, THE WARMING and VENTILATION.

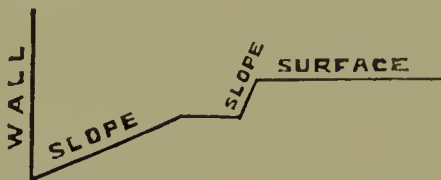
The want of success so frequently noticed in the application of a warming and ventilating process to public buildings has not arisen so much from ignorance of the proper principle to be adopted (for in description all the systems put forth sound nearly alike) as from inattention in carrying out the details, such as the areas of the numerous flues, channels, and shafts, and the accurate distribution of inlets and outlets. The system of warming adopted in this building consists in fixing under the ground floor of the Wards, throughout, two series of flow and return hot water pipes, (one series for the ground and the

other for the upper floor) each in connexion with a heating vessel in the "junction" basement; that is, there are two vessels in each basement in connexion with the two series of pipes, (the external steps to these basements are shown at each junction on the Plan.) Each series of pipes is enclosed in a brick channel, the *lower* part of which is in communication with a fresh air shaft, (shown on the Plan as attached to the day or dining-room of Ward No. 2) by means of a fresh air channel under the Ward; this main fresh air channel ramifies at the junctions to supply the several pipe channels. The fresh air in the lower part of the pipe channels passes vertically through and amongst the beds of pipes—becomes heated by contact with their surfaces—ascends the flues, which open into the channel *above* the pipes, and is conducted by them to the *top* of the several ward galleries; there being a flue of six inches area to each individual. The VENTILATION is effected by means of extracting flues of the same number and area as the inlet flues, starting from the *floor level* of each dormitory, and ascending into a vitiated air channel in the roof of each Ward, which enters the junction shafts; and the air in these shafts, being rarified by fires in the basement, forms an active ascending column, which carries the vitiated air with it into the atmosphere through the top of the shaft—the power of the apparatus depending in a great measure on the area and activity of the junction shafts. The whole of the Ward smoke flues are also conveyed into these shafts, the middle building flues being conveyed into the middle shaft, and the flues of the offices being conveyed into the back shaft as already described, so that these four shafts carry off the smoke from all the fires in the Establishment.

In testing the rapidity of the air current at the mouths of the flues, I have found a speed of from five to seven feet per second. This would give an average supply of fresh air of three cubic feet per second, or 180 cubic feet per minute, for each individual. I say *fresh air*, because herein the merit of the process consists; it would be easy to *warm* the air existing in the galleries, and therefore partially used and vitiated, and this might be done at one-fourth the cost of this system of warming and ventilation combined, by which warm and fresh air is abundantly supplied.

The EXERCISE GARDENS or Airing Courts attached to the Ward,

have already been alluded to. The plan shows their position and extent, and it is scarcely necessary to mention them further, except to state that they are all laid down with turf, and have well drained gravel walks, the tops of the inclosing walls not being more than three feet above the surface—a novelty in the manner in which the slopes of the front Exercise Gardens are managed may be noticed, it is a double slope thus :



the small slope answering the two-fold purpose of forming a seat in fine weather, and of preventing a “running jump” being taken from the top of the large slope to the wall.

The View shows the style of the *Elevations*. I am aware that a classical critic would object that the principal elevation is “too much cut up,” and justly, if the object had been to produce a grand unity of effect, but this has not been my object; on the contrary, I have aimed to individualize each Ward, to give to each an expression of homeliness, to produce shady spaces and warm corners, and to avoid the oppressiveness, to those who inhabit the building, of a grand façade and gigantic institution.

The fronts are faced with red brick, with a pattern of blue Staffordshire brick on the larger spaces; the quoins are of stone, and the windows have stone dressings and mullions, but of a plain character, and more for the purpose of obtaining sound construction than mere ornamentation.

Having thus placed before the Committee as succinctly as I can a description of the arrangement and accommodation of the Asylum itself, I will now, before closing this Report, say a few words descriptive of the Farm and its appointments.

The FARM ESTABLISHMENT lying west of the building, consists of the steward’s house, arranged to accommodate a family, with a bailiff’s

house adjoining ; beyond the bailiff's house is the farm yard, with a large covered manure shed in the centre, at one end of which is a tank (fitted with a pump, &c.) to collect the liquid manure. The farm yard is surrounded by the required buildings, those on the north being—a visitors' stable, a cart house, a barn, a cart-horse stable with harness room attached, a slaughter house, also containing a copper to cook pig and other food, and a hen house ; there are lofts over this range. At the west end is a range of pigsties, arranged on what is called Lord Torrington's principle ; next to these, on the south, are the carpenters' and blacksmiths' shops, at the end of which is a flight of steps leading to a lower level, where is a fold yard with slated shed, and there are cart sheds under the shops. The surfaces of the farm and fold yards are both asphalted. At the top of the steps, in continuation of the south side, is the calf house ; the cow-house, with food store adjoining ; the Magistrates' and officers' stable ; a harness room, and a double coach-house, which finishes this range.

The whole of the foul drainage from the Asylum and from the farm buildings is conveyed into a large tank in the grounds, from which it may be pumped for agricultural purposes. A stack yard is at the back of the farm buildings, beyond which, in the extreme north-west angle, is the BURIAL GROUND surrounded by a dwarf wall. In the burial ground is a small chapel ; also, a mortuary fitted with a table and other necessary appointments.

I have now reported on all the portions of this important undertaking which I believe to be within my province as your Architect ; and I cannot conclude this Report without expressing my most grateful thanks for the kindness, assistance, and consideration I have received throughout the progress of my labours.

I beg respectfully to remain, Sir,

Your most obedient Servant,

HENRY DUESBURY.

London, December 28, 1852.

DR. HITCHMAN'S REPORT.

To the Chairman and Visitors of the Derby County Asylum.

GENTLEMEN,

On the twenty-first of August, 1851, the first Patient was admitted into this Institution. The Asylum was in a very unfinished condition, but the various parishes in the county having been led to expect its completion at that time, and the Union of Belper being under the necessity of sending a Patient to London, if he could not be admitted into this Asylum, permission was given for his reception, and he was admitted accordingly. Your Physician was informed that the Patient had not been long ill, but he proved to be both epileptic and paralysed, and required all the resources of a well-appointed Hospital. One Ward in each wing of the Asylum being completed and furnished, other individuals were speedily admitted. It may be gratifying to the Committee to learn, that the first group of Patients who were brought from various Workhouses and Asylums, were delighted with their new abode, and especially with the Airing Grounds; in these they spent much time, pointing out to each other distant objects in the landscape, and gathering enjoyment from the beauty, the quietude, and extent of the surrounding scenery. The general expression of their countenances, and their language indicated this, and none with greater force than a Paralytic, who when brought to the Asylum was carried by an Attendant from a cart to the Wards, being unable to walk from emaciation and debility, and from deep excoriations, and sloughing ulcers on the hips, sacrum, shoulders and knuckles, produced by the combined effects of paralysis and mechanical restraints. This Patient was brought in a large and easy chair to view the scene; he was apparently listless and stupid, and yet when he had been a short time in the warm open air, surrounded by cheerful companions, and possessing a full view of the green meadows, the distant hills, and all those varied hues of light and shade which filled up the landscape before him, his mind awoke from its lethargy, and

with animated pathos, the poor fellow said, "It is a nice place, I hope I may live to enjoy it." From this time he ceased to be moody and became hopeful, his physical health improved, his wounds healed, he became a useful member of the household, and continued so for several months until a severe attack of apoplexy incapacitated him for exertion. Other Patients in their letters to their friends make frequent, and touching allusions to the beauty of the spot on which the Asylum is placed, and some of the better educated attempt to embody in verse, the pleasure it brings to them. These facts are narrated to illustrate a principle, and to show the importance of surrounding the insane with cheering, and soothing objects.—Dr. Ray, a distinguished American Physiologist, in a critical analysis of the Structure and Management of the Principal Hospitals for the Insane in Great Britain, France and Germany, makes the following judicious remarks upon this subject:—"It is a great mistake to suppose that such things are designed to please the taste of the sane members only of the Establishment, and are not among the legitimate means and appliances for improving and restoring the insane. Insanity is so grievous a misfortune, Asylums are so apt to be regarded in their least pleasing relations, as places of confinement and restraint, and the pang is so sharp of parting with friends at the time they seem to need our attentions most, and entrusting them to strangers, that no means should be neglected to deprive our Asylums of their prison-like features and assimilate them to ordinary abodes of domestic ease and refinement. Let the unhappy sufferer see that though in the midst of strangers who may be associated in his diseased imagination with the enemies of his peace, he is surrounded by the beautiful forms of nature in which his spirit may possibly rejoice and sympathise. And let his friends too, when they think of his abode, be able to dwell upon an image whose features are all pleasing and cheerful. Every one who has had charge of an Asylum, knows how important it is, that the first impression it makes should be agreeable, for in a large proportion of cases, we may be sure it will be of that character, or the opposite. Approaching it, as they do, with their minds full of apprehension and distrust ready to torture the slightest unpleasing circumstance into an augury of evil, it is doubly necessary that nothing in the outside arrangements should meet their sight calculated to cherish their delusions, but much on the contrary, to strike their fancy agreeably, and

awaken a healthier class of emotions." The Committee who selected the site of this Asylum, have most successfully accomplished a great and important duty. The Gloucester Asylum was among the first to avail itself of this element in the treatment of the insane, by raising Pyramidal Mounds in the centre of the Airing Courts, from the top of which extensive prospects of a most beautiful Landscape can be obtained ; the same object has been achieved better here by having the entire Asylum and its Airing Courts on elevated ground, thus obviating the risk of falls from a great height ; doing away with the necessity of high walls, and possessing the great advantage of accommodating all the Patients at one time, and even securing to the Invalids in the Galleries the same cheerful prospect as that enjoyed by those in the open air.

ON THE SIZE OF THE ASYLUM.

The Asylum is capable of accommodating three hundred Patients, and it at present contains one hundred and fifty-two. It thus, at first view, appears too large for the requirements of the County ; and this idea seems supported by the fact, that Thirty-six of the Patients at present in the Asylum belong to other Counties. It will, however, be found that the arrangements of the Building Committee have in this matter been most judicious, and economic. Past experience has shown that the increase in the number of Lunatics is continuous, and that provision must be made for the future. A few facts will illustrate this. Henry the 8th having seized upon the Priory of Bethlem gave it in the year 1547 to the City of London for the purposes of a Lunatic Hospital ; in 1644 it needed enlarging, but civil strife prevented this ; in 1675 it was rebuilt at a cost of £17,000. In 1734 two additional wings were added, and yet in 1751 St. Luke's was built to meet the still increasing exigency. After that date Bethlem Hospital was again enlarged, and moreover numerous large houses were opened by private speculators for the reception of Lunatics. So late as 1826 Sir Andrew Halliday wrote an urgent letter to the Magistrates of Middlesex pointing out the great want of *a County Lunatic Hospital* ; at the Middlesex Easter Sessions of 1828, a Committee of Magistrates reported that they had purchased for the purposes of an Asylum, forty-four acres of land at £275 per acre, besides a remuneration to the occupiers for crops, &c. ; in 1829, they had contracted with Mr. Cubitt for a building

to contain 300 Patients at the sum of £63,200. On the 16th of May, 1831, the Asylum was opened; at the following Michaelmas Sessions 248 Patients were in the Establishment, and the Committee reported that they required “a further sum of £20,000, which with the £107,000 already granted will make the whole expenses £127,000 in order to adapt it for the reception of 200 additional Patients.” Notwithstanding this, the necessity of enlargement still proceeded, until upwards of £180,000 had been expended, and the Asylum had become so large, that it was thought better to build a second, to meet the urgent want of the County,—more than eight hundred of its pauper Lunatics being still in private Asylums. In July, 1851, the additional Lunatic Asylum (upon which nearly £300,000 have been expended) was opened, and in the December following 1,080 Patients had been admitted. In 1841, Lancaster possessed an Asylum capable of containing 593 Inmates; and yet since that date it has been necessary to build two others, capable of receiving conjointly 900 Patients. In Surrey, Kent, Gloucester, and Lincoln a necessity for enlargement has sprung up. When it is remembered that nearly every recent case thrust back from the Asylum for want of room becomes incurable, and a permanent life-charge upon his parish;—that during the very construction of an additional Asylum, a large body of incurable Lunatics is being formed, as in Middlesex, to crowd its Wards the moment it is opened, and thus contribute to the necessity for still further expenditure, it will be seen how wise and judicious it was on the part of the Building Committee to leave an ample margin for future contingencies, and to provide for the immediate reception of all recent cases. The stern demands of a wise economy have been thus met, even while providing in the most efficient manner for the higher claims of suffering and sorrowful humanity.

ON THE FORM OF THE ASYLUM.

The *form* of the Asylum is explained in the plans and elevation annexed to this report. To the architect, Mr. Duesbury, belongs the high honor of having largely embodied in the arrangements of the Asylum the wise and benevolent ideas of Dr. Conolly. The central position of the main offices, the entire privacy of each Ward, which has been secured by short and well arranged corridors of communication, the facility of access and supervision, the arrangement

of the sleeping rooms, the number and character of the baths and padded rooms, the mode of warming the galleries, the length and breadth of the Wards, their cheerful character, the perfect manner in which, by means of a large window at the end of each gallery and the falling back of a Ward (see plan), the pleasing features of the surrounding country are secured equally to the entire Asylum, the height and structure of the building, and the arrangements of its walls and Airing Courts are in greater harmony with the teachings of that distinguished philanthropist, than are those of any Asylum which preceded it, or indeed of any other, with which your Physician is acquainted.

Of the manner in which the Institution has been furnished and organised, it does not become the Resident Physician to speak, further than that he has endeavoured, in an earnest spirit, to carry out the wishes of the Committee by making all such arrangements subservient to the great end of successful treatment. That treatment being based upon those benevolent principles, which commencing with Pinel in France, have reached their highest development, as they have found their most eloquent exponent, in the practice and writings of Conolly in England.

STATISTICS OF THE ASYLUM.

Having made the above observations on the site, size, and form of the Asylum, the Resident Physician begs to draw your attention to the following particulars in the history of the past sixteen months :

Since the opening of the Asylum in August, 1851, two hundred and twelve Patients have been admitted ; of these, one hundred and sixteen were men, and ninety-six were women. The following Table will show the relative proportion of single and married :—

	Men.	Women.	Total.
Single	51	35	86
Married	51	48	99
Widowed.....	12	12	24
Unascertained	2	1	3
	116	96	212

In reading the above particulars it must be borne in mind, that no safe conclusions can be drawn from statistics embracing so small

a number of facts. Thus, the Table coincides with the deductions of large numbers, as regards the relative liability of the two sexes to Insanity, but differs from those which have been obtained as to the comparative liability of the married and single to this fearful malady. The experience obtained in the large Hospitals of France, Germany, and England, by Desportes, Esquirol, Jacobi, and others, has shown that marriage, with the order, sobriety, and regularity, which it usually involves, and from other causes, is highly favourable to mental health. Thus of two thousand four hundred and ninety Lunatics contained in the Bicetre and Salpêtrière Hospitals in France, there were one thousand four hundred and seventy-two who had never been married, and three hundred and fifty who were widowed. Some years ago, Dr. Jacobi, of Sieburg, gave an analysis of two thousand and fifteen Patients, and of these, one thousand five hundred and seventy-three were single; and one hundred and ten were widowed. The extensive records of the Hanwell Lunatic Asylum give analagous results, but not to a corresponding extent. We find, in this, as in all other investigations properly carried out, that the maxims of experience have been forestalled by still higher commands, and that science, even in her most successful elucidations of hygiene, and the general principles which effect the health and happiness of the human race, has been but the exponent of those laws which Divine Wisdom had long before proclaimed for the guidance and instruction of mankind.

As might have been expected in a Pauper Class, the majority of the Patients are uneducated. The following Table conveys an imperfect idea of the extent of this condition, because as in similar tables published at Hanwell and elsewhere, every person is placed under the category of being able to write, who can form writing characters, however slowly and imperfectly he may write out a sentence; and among those who can read are placed, not only those who do so with fluency, but those also, who can by prolonged effort read a few sentences:—

	Men.	Women.	Total.
Can read and write	61	32	93
Can read only	25	37	62
Unable to read	30	27	57
	—	—	—
	116	96	212

Connected with the subject of education your Physician has to observe, that comparatively few of the Patients are described upon admission as belonging to any religious denomination. The "Statement," describing the particulars of the Patient's history, which is required by law to be filled up by the Relieving Officer, or Overseer of the Parish to which the Patient belongs, is very loosely attended to by the said officers. Your Physician hopes that this circumstance may explain the reason why, out of two hundred and twelve Patients, only eighty-six have been described as belonging to any religious community. It cannot, however, be concealed that large numbers of these unfortunate persons have for many years abandoned all places of worship, and in not a few, the mental derangement may be fairly ascribed to long continued indulgence in sensual pursuits.

The following Table will furnish a Summary of the Admissions, Discharges, and Deaths, which have taken place since the opening of the Asylum :—

	Men.	Women.	Total.
Patients admitted	116	96	212
Discharged recovered	17	17	34
——— Improved	1	2	3
——— Unimproved	4	1	5
Escaped	1	0	1
Died	9	7	16
Out on trial	0	1	1
Total, discharged, escaped, and died ...	32	28	60
Remaining in the Asylum, 1st Jan., 1853	84	68	152

Of the above two hundred and twelve Patients, one hundred and eighty-one were in a chronic state at the period of their admission, and among them twenty-three were epileptic, twenty more or less paralysed, and nine were congenital Idiots. From this collective number of 181 six only have been discharged cured. Let us look at the other side of the picture. Thirty-one cases uncomplicated with old age, epilepsy, or paralysis have been admitted at the onset of their mental derangement. Of these twenty-eight have been discharged cured, and two of the others have been a short time under treatment, with every prospect of ultimate success. These facts

speak for themselves. They proclaim with great force the importance of sending Patients for appropriate treatment in the earliest stage of their malady. So anxious is your Physician that this importance should be comprehended clearly by those under whose guardianship the poor of this County are placed, that at the risk of being deemed prolix and wearisome, he will recite other facts corroborative of the same truth. At St. Luke's Hospital, in London, recent cases, and these uncomplicated by other diseases, are alone received. In 1850, sixty-five males and one hundred and seven females were admitted as fit cases for treatment, *i. e.*, were in an early stage of lunacy and free from paralysis, or epilepsy. The number discharged *Cured* were forty-four males and sixty-nine females, making one hundred and thirteen, or about $67\frac{1}{2}$ per cent. of men cured, and about $64\frac{1}{2}$ per cent. of females cured. In 1851 the cures at this Hospital reached a still higher standard, being equal to 74 per cent. Now at Hanwell, where chronic cases in large numbers are received, the result is very different. Notwithstanding its great resources, and its beautiful and salubrious locality, of one hundred and ninety Patients admitted during the year 1851, *eight only were discharged cured*; and the aggregate of cures upon the entire number under treatment in the Hospital did not amount to 3 per cent. How is this? Where is the solution to this painful contrast? It is to be found in the fact, that at St. Luke's Hospital *recent cases* alone are treated, whilst at Hanwell the chronic, the paralytic, and the epileptic are received in much larger numbers than those of a more favourable character. Hanwell has been selected for *contrast*, because its high and well-founded reputation cannot suffer by such allusions, whereas other Asylums similarly circumstanced in reference to the influx of chronic Patients, might deem such comparisons invidious and hostile. These facts prove that the most reckless extravagance of which a parish officer can be guilty is to detain a Lunatic in the Workhouse, or in a cottage, under the hope that "he may be better in a few days." The "few days" may produce such organic change in the brain of the Lunatic as to render him incurable, a permanent tax upon his parish, and a permanent sorrow to his friends. That man commits a crime who, knowing this, debars an insane fellow-creature for a single hour from proper medical aid.

By such an act, he indirectly robs the parish treasury of its funds. He does worse. He consents to the overthrow of a Human Intellect, and incurs the guilt of a Destroyer.

ESCAPES.

During the unfinished condition of the Asylum, and owing in a great degree to the carelessness of a workman, one Patient effected a permanent escape. After a prolonged and expensive search for the fugitive, he was discovered with his friends at Bonsall, at which place he had been previously searched for in vain. The time allowed by statute for his recapture had expired. His friends, and the Parish Authorities, deemed him sufficiently convalescent to remain at home, and therefore no further steps were taken to compel his re-admission.

One powerful "Criminal Lunatic" effected his exit from the Asylum during the night, by breaking open the door of his sleeping room, and escaping through a window, but he was speedily recaptured. Your Physician earnestly hopes that the efforts which are being made to establish a distinct Asylum for these dangerous individuals, may be crowned with success. It is unnecessary to enter upon any subtle distinction between some forms of madness, and crime. It is right that society should be protected from the Homicide—whether he be impelled by an *irresistible impulse* to destroy, or deliberately resorts to murder as the means of gratifying his lust, his avarice, or revenge. Such special cases demand a special treatment. A building which would ensure the necessary protection to the public, would be ill adapted for the cure of ordinary insanity; and it is therefore greatly to be desired, that the State make some special provision for those persons who have been convicted of serious crimes, but have been exempted from punishment under the plea of mental derangement.

OBITUARY.

No.	Sex.	Age.	Cause of Insanity.	In the Asylum.	Cause of Death.
1	Male.	—	Not known.	4 weeks 4 days.	General paralysis.
2	M.	72	Age.	3 weeks 3 days.	General debility.
3	Female.	57	Poverty.	8 weeks.	General debility.
4	M.	31	Epilepsy.	10 months.	Epilepsy.
5	F.	88	Age.	3 weeks 3 days.	Old age.
6	M.	36	Intemperance.	3 days.	Exhaustion after mania.
7	F.	28	Jealousy.	7 months 5 days.	General paralysis.
8	M.	36	Intemperance.	11 weeks 3 days.	Exhaustion after mania.
9	M.	42	Unknown.	20 weeks 2 days.	General paralysis.
10	M.	33	Ditto.	13 weeks.	General paralysis.
11	F.	64	Epilepsy.	27 weeks 3 days.	General paralysis.
12	M.	35	Unknown.	24 weeks 5 days.	General paralysis.
13	F.	36	Congenital defect.	4 weeks 2 days.	General paralysis.
14	F.	46	Hereditary defect.	19 weeks 1 day.	Erysipelas.
15	F.	36	Dissipation.	12 days.	Exhaustion after mania.
16	M.	30	Fever.	6 days.	Exhaustion after mania.

It will be observed, that of the two hundred and twelve Patients who have been under treatment during the past sixteen months, sixteen—namely, nine men and seven women—have died. Three of these might have been termed moribund at the period of their admission, as life was sustained for a few days only, by the administration of warmth, wine, and other restoratives. Seven were in advanced stages of general paralysis—a disease which has hitherto proved so fatal, that many experienced practitioners doubt the authenticity of a single cure. The man aged 72 years was brought upon a bed to the Asylum, and was powerless from age. The woman aged 88 years died from natural decay. Deplorable as these “Admissions” may appear to the inexperienced, it is in truth a more favourable result than that obtained by many other Asylums. The “West Derby Asylum,” for instance, which opened in January, 1851, received 393 Patients during the year, and of these forty-eight died—nine or ten of them dying within a week of their reception. In some of the Asylums in the neighbourhood of London, the mortality reaches as high as 23 per cent. The mean average in the best conducted Institutions in this kingdom is about 9 per cent. Mania, in some of its acute forms, is a malady highly dangerous to life, and in all its forms has a tendency to shorten the duration of life. So much error prevails, even among medical men, upon this subject, that the Resident Physician deems it right to repeat the observations which he has made elsewhere. According to the statements of a writer in the “Penny Cyclopædia,” the mortality in

the Norfolk Asylum from 1836 to 1845 reached as high as 19.74 per cent., and at Lancaster 14.94 per cent., and Stafford nearly as high; the mean of 44 Asylums in England, Ireland, and Wales being about 9.62 per cent. There are not yet observations enough made on an accurate basis to determine the mortality of Lunatics at different ages; but assuming, as Dr. Farr has done, that the mean age of Lunatics does not *exceed* forty to forty-five years; then if according to Quetelet, the average mortality of the general population at that age be 1.17 per cent., or, according to Farr, 1.50, it follows that insanity, to use Dr. Farr's words, "increases the mortality six-fold." This calculation gives such an excess of mortality, so to speak, so completely to set aside any difference which may ensue from a slight error in the probable average age of the Lunatics referred to, in making a comparison of the mortality of the insane and sane. Again, a tolerably extensive experience among the insane justifies the statement, that, with the exception of fever, there is no disease which they are not as liable to as the general population, whilst they incur the additional risks of the affections incident to mental derangements. Some time ago, a lawsuit sprung up from this very subject, by which a Life Insurance had to pay over £2,000 to the executors of a Lunatic, upon medical evidence, which every one now knows to have been utterly at variance with facts. Many medical men were examined, and the majority decided that insanity had not a tendency to shorten the duration of human life. The weekly medical press of the period espoused the opinion of the majority, and thus perpetuated the error, and the wrong arising out of it. It is easy to perceive the data, from which such erroneous opinions spring, even in the small number of Patients whose deaths have been brought before you. A few isolated facts, such as the great age of an individual Lunatic, or an obituary limited to three or four persons who may have died in his neighbourhood, have impressed themselves so strongly upon the attention of the observer, that he has committed the great but common fault of coming to a conclusion without affording the whole mass of cases a proper consideration. This natural impulse of the mind leads constantly to vicious inductions in all branches of philosophy, but in none so frequently as in the science of medicine. It is necessary, in such a matter, to search over a large number of facts, and over a great

space of time, and then, we learn that *insanity does shorten the duration of human life*; that the mortality of the insane is greater in the earlier stages of the malady than its subsequent stages; and that it is more fatal among the male, than among the female Patients. It is in the matter of births and deaths, or such like positive facts, that statistics are so valuable. In reference to the comparative merits of different modes of treatment, or in special diseases, there is less confidence to be placed in them, inasmuch as the results must ever be influenced by the diagnostic skill, and therapeutic knowledge of individual Practitioners.

GENERAL CHARACTER OF PATIENTS ADMITTED.

The majority of the Patients admitted have not only been in a chronic state of insanity, but also in a feeble state of bodily health. In some of the cases, the mental disease appeared to have been caused by the want of a proper supply of healthful nutriment to the brain. Two women, who were admitted, weighed only seventy-four pounds, and sixty-seven pounds respectively. The lighter of the two died, the other recovered—the means of cure consisting chiefly in the good dietary, the warmth, the cleanliness, and general cheerfulness of the Establishment. It may be remarked here, that one of the most striking incidents in the progress of the cases, which have become well, has been the gradual increase in the weight of the Patients as the mental disease subsided. During the paroxysm of mania, no matter how voracious the appetite, or how abundantly supplied, emaciation proceeded; but as convalescence returned, the individuals gradually increased in size and weight; and this process has, in some instances, gone on, even after the Patient has left the Asylum, so that as after an attack of fever, or other kindred maladies, the individual has become stouter than he had ever been before. The same facts have been observed in other Hospitals; thus Dr. Kirkbride, the able Superintendent of the Lunatic Hospital in Pennsylvania, records the case of a Patient who increased “sixty pounds in his weight in less than two months, a part of the time having an average gain of more than two pounds a day.” The records of St. Luke’s Hospital, as now preserved by its talented medical officer, Dr. Arlidge, give analagous results. During a paroxysm of intense maniacal excitement, emaciation proceeds with as great rapidity as in pulmonary

consumption : and in many cases, if the Patient be not abundantly supplied with nutritious food, he will undoubtedly sink from inanition and exhaustion. The corpuscular structure of the brain in its ultimate simplicity seems to convey the idea, that with each process of thought a physical change takes place ending in the destruction or removal of a certain molecule of matter and requiring a deposit of new material to preserve the organ in its healthful condition. If this be so, as some of the best physiologists believe, then in the incessant change of ideas and rapid eliminations of thought which characterise the early stages of acute mania, is seen a full explanation of the great emaciation which takes place in such cases. If there be no evidence of returning reason proceeding *pari passu* with an increase of weight, the Resident Physician has observed, that such individuals frequently sink into an incurable state of insanity, characterised for a while by elevated ideas and exaggerated notions of wealth and power ; but ultimately followed by paralysis, dementia, and death.

Thirteen females out of the ninety-six admitted since the opening of the Asylum, had goitré, or an enlarged condition of the thyroid gland. This enlargement varies considerably according to the physical health or mental state of the Patients. During a paroxysm of hysteria (in one woman who has now left the Asylum) the gland very much enlarged, and it considerably decreased in capacity as the Patient approached convalescence. These Patients were, for the most part, inhabitants of the northern parts of Derbyshire. No enlargement has been perceived in the necks of the male Patients.

Twenty-three epileptic Patients have been admitted. During the months of June and July of the past summer, their fits were very frequent and very severe ; not only were the paroxysms more violent and prolonged, but the Patients in the intervals of the fits were very irritable, maniacal, and dangerous. The temperature even in the Wards frequently reached as high as 72 degrees in the earlier parts of the day. The following is a brief extract from "The Daily Report Book" of July :—"The heat is intense ; even in the Wards at 9 a.m., the thermometers ranged from 75 to 77 degrees. A terrific thunder storm, accompanied by a hurricane of wind and rain, has

visited this neighbourhood to-day ; huge branches were torn from some of the trees on the farm, the barley and potatoes are beaten down by the rain and hail, and the shafts of an adjacent windmill were struck off by the lightning. The lightning appeared of all colours, probably from the deluge of rain through which it passed ; the air had a sulphurous odour, and the thunder was incessant. Two epileptic Patients have been in seclusion for six or seven hours ; others are very much excited, and dangerous, and some have been greatly convulsed ; either from the heat, or a special electric condition of the atmosphere, the Patients have been unusually excited, and more have been temporarily secluded in their rooms during the past fortnight than in any two months since the opening of the Asylum."

The epileptic paroxysms have not appeared to be in any degree influenced by appreciable lunar conditions. As a general rule, they bear no relation to the moon's age—although, being irregularly recurrent in their character, a seeming coincidence has been detected in special cases. It is moreover possible, that in sensitive and impressionable persons some influence may be exerted by that planet. The idea which has been cherished through many ages, and in all countries, and which has impressed itself upon the nomenclature of mental diseases in all languages, is probably not wholly wrong, although certainly not applicable to the *generality* of cases in this country.

The Tincture of Sumbul, and the Extract of the Cotyledon Umbilicus, have been employed during the past year, as remedies in this malady, but with no better success than usually attends a novel medicine in this disease. With the use of each drug, the fits appeared, for a short time, to be less frequent than before its administration ; but this effect was equally marked when *any* medicine was given to them with an air of confidence. As a class, they are fond of physic and hopeful of cure.

Two female Patients, in a state of frantic mania, and in an advanced stage of pregnancy, have been admitted, and safely delivered of living children. These cases were full of embarrassment and

danger, and required the greatest courage, forbearance, and kindness on the part of the Nurses. From a combination of circumstances in one case, such as profuse hemorrhage after the birth of the child, accompanied by intense and prolonged maniacal phrenzy, the services of three Nurses, and sometimes more, were required for several days and nights in succession. This case occurred during the time that Dr. Hutchinson Ramsay had the temporary charge of the Asylum; and your Physician is happy to testify, not only to the skill which was brought to bear upon this especial case, but also to the very efficient manner in which the other duties of the Asylum were conducted during that gentleman's superintendence. Neither would he be doing justice to his own feelings, or to those of Dr. Ramsay, were he not to record the devotedness, the energy, and industry which were displayed by the Nurses of the Establishment during these trying emergencies. Each Nurse endeavoured to excel the other, in their efforts to control the Patient, and to render such other aid by night and day, as the case required. Chloroform was, with great advantage, administered to the above Patient, under the advice of Dr. Forbes Winslow, who happened to visit the Asylum at that particular period.

Five Patients have been received, who required for many months the constant use of a water bed: two of these persons had extensive bed-sores at the period of their admission, and required a large amount of nursing and care.

One poor woman, who had been demented for five years, was kept at home until she fell into the fire and became extensively and severely burnt over the entire shoulders, sides, and back, and then she was brought to this Hospital. Her life was long despaired of, but she has now recovered from the burns. She is still demented, extensively paralysed, very noisy, and requiring all the attention and care of a new-born child.

An old man totally blind, and requiring the assistance of a second party, not only to guide but to support him, has been also received.

A female Patient, who had been insane for eleven years, was

brought to the Asylum (accompanied by her father) in a very dirty condition, and having her knee joints permanently ankylosed. She was brought to this Hospital against the wishes of her parents, and through the intervention of some benevolent individuals.

VALUE OF THE ASYLUM TO CHRONIC CASES.

The *cures* effected by a Public Hospital for the Insane are by far the greatest advantage that is derived from its establishment, but it is by no means the only good which the Hospital is daily and hourly conferring upon suffering humanity. Those only who have lived in Public Asylums know the misery, the wretchedness, and the wrong which are constantly inflicted upon Lunatics in obscure places, even by their relatives and "friends;" and which cease only with the life of the Patient, unless he be conveyed to a well-conducted Institution. It is, moreover, a remarkable phenomenon, that many individuals who perpetrate these enormities upon their kith and kin, who have habitually fastened them with coarse cords, who have deprived them of a proper supply of clothing, or of food, who have in short rendered them permanent cripples in body, as well as hopeless idiots in mind, have done so without malice, as a general rule, without passion, by slow degrees, and with no conception whatever of the present suffering, or ultimate mischief effected by their proceedings. They affect no secrecy among their neighbours, while these things are going on. Familiarity to the spectacle blinds their perceptions, and blunts their feelings, until their relative is consigned to other care, when frequently by this act their early instincts are evoked, and they become not only sensitive to the wrongfulness of such acts, if perpetrated by others, but restless, unhappy, and full of unaffected alarm lest their relative should meet with neglect and cruelty at the hands of a stranger. Such persons visit the Asylum in a suspicious and restless state of mind, their fears distort, exaggerate, and misinterpret every incident—they are constantly alarmed for the safety and comfort of their relative, and perplex themselves with a thousand fears respecting the recovery of the very individual, who has been placed for ever beyond its pale, by their own proceedings. Others there are who from penurious and selfish motives inflict much wrong upon the Lunatic. Of such a kind

appears the following. "T. G., removed from the custody of his relatives by the order of the Magistrates. Has been insane thirty-eight years, under the management of his relatives, who have generally had him confined in an out-building." "He is stated to have been unclothed for many years. When brought into the Asylum he was naked, except that around his pelvis were the remains of an article of dress; his hands were tightly bound to each other by ligatures passing around the wrists. When in the cart he was covered with a blanket, but this fell from him during his struggles on being removed. He roared hideously as he was being conveyed to the Wards. He is a person of lofty stature and great size. His head and neck are very large; one side of his forehead is greatly disfigured by scars, and he has lost an eye. His ears have been deprived of their normal shape, and their lobes much thickened by the deposition of fibrine, or other matter. His lips are large and pouting. His beard has been long unshaven, but has been recently cut with a pair of scissors. The bones and muscles of his arms are of great size—his lower extremities are red, swollen, and 'pit,' under pressure; one of his toes is deprived of its nail, and the whole foot appears to have suffered from the effects of cold. He walks with a stooping gait, and appears unable to retain the erect posture without support. He resists powerfully all attempts to clothe him; and appears to be entirely ignorant of the use of a bedstead. He whines after the manner of a dog that has lost its home. He dreads all who approach him; on being taken from his room in the evening, he hurried back to it with all the haste he could, and on all occasions he shrinks from observation. He is lost to every sense of decency; nakedness is congenial to him, but he will sometimes coil himself in a blanket for the sake of its warmth. He is guided by the lowest instincts only, and his whole appearance and manner, his fears, his whines, his peculiar skulking from observation, his bent gait, his straight hair, large lips, and gigantic fore-arm painfully remind one of the more sluggish of the Anthropoid Apes, and tell but too plainly to what sad depths the human being can sink under the combined influence of neglect and disease."—Case Book, page 43.

Fifteen months have elapsed since the admission of the above Patient—he now walks about the Galleries properly clothed, smiles

when he is approached, puts out his hand in a friendly manner towards those he recognises, sits regularly at meals, is shaved at appointed times, carries himself nearly erect, and looks as if he belonged to the children of men.

THE GENERAL TREATMENT

The general treatment pursued at this Asylum resembles that which was practised at Hanwell during the time Dr. Conolly was its Physician. Some alterations, suggested by visits to other Asylums, and by constant reflection upon the subject, have been introduced; but these changes are in details only, and are among the results which that distinguished philanthropist foretold would ensue, as the system of "Non-Restraint" developed itself. All the changes have been in the direction of greater freedom, and are indeed but a higher manifestation in practice of the same idea, the early and imperfect time-fruits of a great principle, and replete with praise to those only, who evoked and upheld that principle when its truth was doubted, and its blessings unknown. Among the more prominent of these improvements is the greater extension of out-door occupations—frequent excursions into the country—the assembling of the two sexes at the Annual Parties—and a closer approximation to the ordinary clothing, furniture, and arrangements of social life.

The above system has been severely tested during the past year. Patients have been brought to the Asylum in every kind of restraint, and with most fearful characters; but no amount of fury or of strength and no description of character, however terrible, have caused us to hesitate for a moment in freeing the Patient from his cords and fetters, and in no single instance has there been reason to regret the proceeding. The case of T. G., confined for many years in an outhouse—of A. G., and J. T., are illustrations; but the following particulars of a case very recently admitted, will serve to illustrate the principle:—
 —“———— Workhouse, December 18, 1852.—He has been with us about 24 hours, and a *terrible* night we have had with him. He has been shouting ‘*Murder*’ at the top of a stentorian voice, enough to alarm the neighbourhood for some distance. One of his Attendants he knocked down, and we found it to be absolutely necessary to

restrain him. Gloom and melancholy appear to be a phase of his insanity, with alternate violence, and certainly at these times he appears to have the strength of an elephant." Such was the note of introduction which accompanied the Patient. One of three men who brought him stated that his finger had been severely crushed by the Patient, who pinioned him between the door and its post, "and kept me there for more than an hour." If ever "restraint" was needed, it was with this man. He is six feet high, very muscular, and with a wrist which few persons can span. He was brought to the Asylum firmly pinioned by ropes and hand-bolts, and his arms were severely bruised from this cause. In a few minutes all the manacles were removed; he has had the perfect use of every limb since he has been in the Asylum, and has been fully controlled by moral means alone.

Thirty suicidal cases have been admitted. Many of them had made desperate attempts upon their lives prior to admission. One by throwing himself upon the fire, and subsequently by thrusting a tobacco pipe down his throat, the bowl of the pipe being left in his stomach at the period of his admission into the Asylum. He did well, and has left the Asylum cured. Others have required watching day and night, without a moment's cessation; but no "restraint" has been resorted to and no suicide has hitherto occurred. Several of the above Patients exhibited a great amount of fear (Panphobia), and were momentarily anticipating some terrible, crushing, undefined, and undefinable calamity. Analagous cases have been benefitted by large doses of Acetate of Morphia, as first prescribed by Dr. Hodgkin; but the above Patients obtained great relief from a combination of Battley's Sedative, with Tincture of Hyoscyamus. Sleep is all important to such persons, and is usually followed by a modification of their fears, and a subsidence of the suicidal impulse. Four Patients have been admitted, who had long abstained from food, as the only method within their reach of self-destruction. It became necessary to feed one of these men by means of the stomach pump, and there being two others in the house who were giving great trouble from this cause, they were brought to witness the operation. Henceforward the one operated upon, and the two who witnessed the operation, partook of food without much persuasion, and sought in vain, for other means to accomplish their purpose.—The *refusal of food* by

Lunatics is an important subject, but too extensive in its details for the present report. One Patient was brought to the Asylum in a state of great exhaustion from this cause, and died in three days after his admission. It was stated that he had not taken food voluntarily for three weeks, and that until the morning he was brought from home he had not taken any food for a fortnight. He was fed daily during the time he was in the Asylum. There were no indications of a suicidal purpose in this poor man—he presented the symptoms of typhoid fever in an aggravated form, and could not have digested solid food if it had been given to him.

SECLUSION.

“*Seclusion*,” in a “padded room” is sometimes adopted as a curative agency. The padded room is the ingenious contrivance of Autenrieth of Tübingen, and was described by him as early as 1807. It has passed through the ordeal which usually awaits important inventions and discoveries. It has been despised, abused, criticised, and adopted. It has been described as “a den,” in which men “become beasts in reality,” even by those who could espouse “the rotatory chair” with all its abominations. It remained neglected, or nearly so, until Dr. Conolly commenced his great experiment at Hanwell, where it superseded the restraint chair, and all other contrivances which manacled the person. It has saved much suffering and more humiliation. Four of these rooms have been provided on each side of the Asylum: their sides are well stuffed with horse-hair, and covered with “macintosh,” or good linen “tick,” and the mattresses which cover the floor are formed of the same material. In the wild excitement of mania, it frequently becomes necessary to shut off all external incidents. The judgment being too much disordered to compare, or understand the information of the senses, their impressions only serve to increase the rapid and confused ideas with which the Patient is agitated and distressed. Then, the padded room becomes as salutary to the phrenzied brain, as is partial darkness to the inflamed eye; and there are few things more satisfactory to witness, than a bruised and excoriated Maniac just liberated from ropes, leg-locks, and handcuffs, surveying for a few moments the interior of a well padded room, and then lying down upon its soft

mattress to enjoy the luxury of repose. This is no uncommon incident, as some Members of the Committee can testify. To the epileptic rolling in convulsions, this room is most useful. Like opium, tartar emetic, and other valuable agents, seclusion is liable to abuse; but it cannot be abused without the consent of the Superintendent, unless by such a combination of fraud that is not likely to occur in any well-regulated Asylum. In this Establishment every seclusion enforced by an Attendant is immediately reported to the Chief-Attendant, and by him to the Physician, who determines upon its propriety, and regulates its duration. It is very rarely required, except in acute cases; and to call it "Solitary Imprisonment," is as much an abuse of terms, as to call a sick man a prisoner.

DIET.

Having learned from the writings of Pinel, that the Patients in the large Lunatic Hospitals of France had been deprived of a great portion of their usual food by a decree of the Revolutionists, and that forthwith the Patients became more furious, and the mortality increased rapidly—but more especially, from having observed in his own experience, and from the history of English Asylums, that the mortality in such institutions has diminished as the dietary has been raised, the Resident Physician was very anxious that the Dietary of this Hospital should be generous, and abundant. It is with grateful feelings that he records the consent of the Committee to adopt, in a great measure, the Dietary of Hanwell, as improved by Dr. Conolly, and which is represented in the following table. It may be stated, that the Patients have been supplied with two kinds of vegetables daily, ever since the opening of the Establishment, and to this, among other circumstances, are owing the health and cheerfulness which at present characterise the Patients.

ORDINARY DIET.

	BREAKFAST.										DINNER.										SUPPER.									
	Males.					Females.					Males.										Females.									
											Males.					Females.														
	Bread.	Milk Porridge.	Bread.	Milk Porridge.		Beer.	Bread.	Uncooked Meat.	Pie or Pudding.	Soup.	Stew.	Vegetables.	Beer.	oz.	pt.	Bread.	Uncooked Meat.	Pie or Pudding.	Soup.	Stew.	Vegetables.	Beer.	oz.	pt.	Bread.	oz.	pt.	Bread.	oz.	pt.
Sunday	6	1	5	1	1	$\frac{1}{2}$	6	7	..	..	12	$\frac{1}{2}$	5	7	5	7	..	..	..	12	$\frac{1}{2}$	6	2	5	1	1	1	5	1	1
Monday....	6	1	5	1	1	$\frac{1}{2}$	6	..	..	1	..	$\frac{1}{2}$	5	..	5	..	..	1	..	..	..	$\frac{1}{2}$	6	2	5	1	1	5	1	1
Tuesday ...	6	1	5	1	1	$\frac{1}{2}$	6	7	..	..	12	$\frac{1}{2}$	5	7	5	7	..	..	..	12	$\frac{1}{2}$	6	2	5	1	1	1	5	1	1
Wednesday	6	1	5	1	1	$\frac{1}{2}$	6	7	..	..	12	$\frac{1}{2}$	5	7	5	7	..	..	..	12	$\frac{1}{2}$	6	2	5	1	1	1	5	1	1
Thursday...	6	1	5	1	1	$\frac{1}{2}$	6	..	..	12	..	$\frac{1}{2}$	5	..	5	..	..	..	12	..	..	$\frac{1}{2}$	6	2	5	1	1	5	1	1
Friday	6	1	5	1	1	$\frac{1}{2}$	6	7	..	..	12	$\frac{1}{2}$	5	7	5	7	..	..	..	12	$\frac{1}{2}$	6	2	5	1	1	5	1	1	
Saturday...	6	1	5	1	1	$\frac{1}{2}$	6	..	14	..	..	..	$\frac{1}{2}$	5	..	5	..	14	..	..	..	$\frac{1}{2}$	6	2	5	1	5	1	1	

N.B. Workers $\frac{1}{2}$ pint Beer extra at 11 o'clock a.m., and at 4 o'clock p.m.

CLOTHING.

Great attention has been paid to the clothing of the Patients. Every person who has been accustomed to wear flannel prior to his admission is supplied with similar articles on his arrival. The male Patients are clothed in grey cloth, except those who are engaged in the garden and farm, who are provided with a fustian dress. Each Patient is supplied with two shirts weekly, and the bed linen of clean Patients is changed on every Friday. There are others who require an entire change of bed linen and clothing daily. The female Patients are clothed warmly, and are allowed considerable choice in the selection of patterns for their cotton gowns. Mischievous Patients are kept neatly clad by means of an ingenious button, invented by Dr. Powell, and greatly improved upon by Mr. Alderson his successor at the Nottingham Asylum. The Patients sleep upon horse-hair mattresses formed of the best material, and are allowed three blankets and a rug, in addition to the linen before alluded to. It should have been stated, that aged female Patients, and others, when they require it, are supplied with gowns made of a very strong, and warm grey cloth. Singularity in dress is avoided as much as possible, and the closest approximation to the dress of sane persons of their own class is aimed at.

EMPLOYMENT.

Many tons of earth have been moved in wheelbarrows, and spread over the garden. The garden has been thoroughly trenched in the winter, and dug and planted in the spring and summer. The demand for tools in the hay and corn harvest was greater than the supply. Eleven acres of barley, four acres of oats, three acres of wheat, five acres of peas, and twelve acres of grass and seeds were mown, and harvested by the Patients and their Attendants without any additional paid labour—one Patient who had never mown before, keeping pace with, and even out-vicing the "Farming Man" and others, who had been accustomed to the work. They took a deep and lively interest in all the proceedings, and seemed to identify themselves with its ownership. This feeling causes them to labour cheerfully in the garden, as they know that they freely partake of all its produce. The condition of the roads, the ditches, the

fences, and the weed-grown state of the Farm have supplied, and will supply labour for many hands. It is not pretended in this summary to embrace the entire work, or to give an account of the planting, hoeing, digging up, and storing potatoes, and other vegetables, which may be inferred from the "Farm and Garden Account" in the Appendix, nor to unfold the daily labours required upon the Farm, and for the due supply of vegetables, coals, and necessaries to a large Institution, and for maintaining its cleanliness. The Reports of the Commissioners in Lunacy will show that these things are efficiently done, and to do them, demands a steady and continuous application of labour. It may be stated here, that the first appointments of "Farming Man" and "Gardener" were unfortunate, both individuals proving to be careless and drunken. The office of "Gardener" is now ably filled up by William Joyce, who was formerly Chief Attendant, but has since brought his industry and trustworthiness into good account as "Gardener," and general out-door officer in all that affects the employment of the Patients. Throughout the Asylum the doctrine is strongly enforced, that laziness is a disgrace to any man in health, and all Patients who are physically capable of employment are encouraged to work; but in order that no cruelty should arise from a too fervid zeal to show a profitable balance of labour done, no Patient is *compelled* to work, nor are the Attendants allowed to exert any influence, *except their persuasions are preceded, or accompanied by their own example*. "Come and work," is the watchword of the Establishment, and thus employment is soon regarded by the Patients as a privilege and a distinction, and ceases to be irksome. By the Resident Physician, the employment of the Patients is regarded rather as an element of treatment than a source of profit to the Asylum; and is at all times made subordinate to the comfort and happiness of the Patients entrusted to his care. Thus viewed, it becomes a powerful auxiliary in the restoration of the Patient; and its first adoption as a principle by the late Sir William Ellis of Hanwell, entitles him to rank among the wise and judicious benefactors of mankind.

AMUSEMENTS.

The more convalescent and trustworthy of the Patients are per-

mitted during the summer months to take excursions into the surrounding country, under the superintendence of some responsible person. This is an indulgence which they appreciate highly, and it is followed by beneficial results. The feeble and unoccupied have free access at all times to the pleasant Airing Courts. The healthy men find both exercise and amusement in the occupations of the garden and field. In the summer they play at cricket, foot-ball, and other manly games. The females obtain amusement from playing at ball, Le Gras, and other feminine pastimes. Both sexes are provided with bagatelle, chess, draughts, dominoes, cards, the illustrated papers, many periodicals, and a small library. The above resources, with exhibitions of the magic lantern, dancing, singing classes, and occasional readings by the Resident Physician, from some popular work, are the amusements which are systematically introduced, and carried forward through the various seasons of the year.* On Christmas Eve of each year 1851-52, both sexes were provided with coffee and cake, and entertained by magic lantern exhibitions, dancing, &c. The preparations for this Annual Entertainment arouse many lethargic Patients and infuse a spirit of cheerfulness over all parties. The entertainment of the present year went off with great animation, order, and propriety. Several visitors were present, and some of them, who were connected with the local press, have publicly expressed their admiration of the scene. After observing, through a series of years, the effect of such entertainments, your Physician is confident of their practical utility both directly upon the mind and feelings of the Patient, and indirectly as a security against neglect and abuse. No such entertainment can proceed in a cheerful and orderly manner unless all its antecedents have been in harmony with it. Such amusements are moreover usually followed by tranquillity and sleep. In visiting the Wards at one o'clock on the above night, not a single person of all those who had shared in the amusements of the evening was found noisy or restless, but all appeared to be tranquilly asleep. The above amusements, as indeed all other details here referred to, must be regarded as parts only of a General System of Management, and that if disconnected from it, they not only become frivolous and

* It may not perhaps be out of place to state for the information of the charitable, that pictures and books are always acceptable as donations to the Asylum.

vain, but even injurious to the persons for whose benefit they were designed.

RELIGIOUS SERVICES.

The Patients meet in No. 1 Male and Female Wards respectively every morning and evening for "Family Prayers." Every Patient not incapacitated by illness is expected to attend, unless he should entertain special scruples against the form of prayers used, when such feelings would be respected and dealt with accordingly. No such scruple has however arisen, nor has any untoward incident occurred at these services throughout the year. A hymn is sung, and a few prayers, selected from the beautiful Liturgy of the Church of England, are read. The Patients and Attendants of the Asylum meet twice daily at this holy rite ; and the sympathy manifested in the utterance of mutual wants cannot be wholly without its use, even in the subordinate sense of a curative agency. By this training moreover, the Patients are better fitted to appreciate, and to join in the more prolonged services at the Chapel, on the Sabbath day.

The Chaplain's Report will explain the manner in which these Services have been attended ; but it is the pleasing duty of the Resident Physician to inform the Committee, that ever since the appointment of the Reverend Joseph Sowter to the office of Chaplain, he has found in him a judicious, a kind, and willing coadjutor in all that appertains to the well-being, and happiness of the Patients.

The above remarks, short as they have been in relation to the importance of the subject, may serve to show the principles upon which, under Providence, the Asylum has been conducted through the first year of its operations. The exertions of the Committee have not been unappreciated, or without success. Visitors have been unanimous in their admiration of the arrangements of the Building, its Grounds, and of its general management ; but with due respect for popular opinion, the Resident Physician refers with especial gratification to the high eulogy which, after repeated scrutiny into the general plan and arrangements of the Institution, was given by one, who holds a foremost rank in all that appertains to the improved treatment of the insane—the Venerable Dr.

Charlesworth was pleased to state, that "the Asylum contained more excellencies, and fewer defects than any similar Institution with which he was acquainted." After the labours which the Committee have passed through in endeavouring to construct and organise an Asylum, which should be in harmony with the advanced views of Science, it is gratifying to find their efforts thus appreciated. The spontaneous praise of the Founder of the "non-Restraint System" is the seal of successful exertion, and its graceful and appropriate reward. The Asylum has been inspected by other distinguished Psychologists, but it is necessary to refer only to the official visits of the Commissioners in Lunacy.

COMMISSIONERS' REPORTS.

[COPY.]

July 27th, 1852.

Since the opening of the Asylum on the 21st August, 1851, 158 Patients have been admitted, and 35 are entered in the Discharge Book: of them 22 were discharged recovered, 5 relieved or transferred to other Asylums, 1 escaped, and 7 have died.

There are now 123 Patients in the House, namely, 66 men and 57 women; of these 25 are out County Patients, belonging chiefly to Nottinghamshire.

The Patients we found to be remarkably quiet, cleanly, and in good bodily health. They were neatly and suitably dressed, none of them wearing any Ticking or strong description of Dress. All the Patients were unrestrained and we are glad to find that there are no instruments of restraint in the Establishment.

Seventy-five of the Patients are regularly occupied, and about 82 attend Chapel. Various in-door amusements are judiciously provided for the Patients, and the most trustworthy and convalescent inmates have the benefit of occasional excursions into the surrounding country.

The various Wards are remarkably cheerful, well furnished, clean, and free from any offensive smell.

The Registers required by the Act of Parliament are regularly kept, and the records made in the Case Book are very complete and satisfactory.

About 10 Acres of the Land is already under cultivation by spade husbandry, and we understand that it is proposed gradually to bring the other portions of the Estate into similar cultivation.

The Farm Buildings and offices we found well arranged and in good order.

Taking into account the short time the Establishment has been opened, we consider it to be in a very satisfactory state and highly creditable to those engaged in its superintendence.

(Signed)	J. W. MYLNE, S. GASKELL,	} Commissioners in Lunacy.
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[COPY.]

Derby Asylum, 16th Dec., 1852.

We have visited this Asylum to-day, and have inspected all the Wards occupied by Patients.

We found every part of the Establishment in the best order.

The Patients were remarkably tranquil, and no one was in seclusion. They were very neat in their persons and dress.

Two Males were in bed suffering from bodily illness, but on the whole the condition of the Asylum is healthy, and only 7 Patients are registered as being under medical treatment.

We regret to learn that Patients are frequently brought to the Asylum in extremely feeble bodily health, and we observe that of the Patients who have died, several had not been admitted more than a few weeks; indeed some of the Patients have never risen from the beds to which they were taken on their admission.

Since the last visit of the Commissioners in July, 46 Patients have been admitted; 12 have been discharged—of whom 9 were recovered, and 8 have died from various causes.

At present the Asylum contains 148 Patients, viz.—79 Males, and 69 Females.

On an average about 38 Males and 36 Females are regularly employed—the Men on the Farm, and the Females in the Kitchen, Laundry, and Wards, and at their needle.

The Case Book and other Registers are carefully kept, and the Institution is in a perfectly satisfactory state.

	W. G. CAMPBELL,	} Commissioners in Lunacy.
(Signed)	T. TURNER,	

These Reports, and the facts upon which they are based, prove that your Asylum has accomplished much good. It remains to record the labours of those who have aided in this result. On the tenth of July, 1851, the Steward and Clerk (Mr. Langley) entered upon his duties at the Asylum, and has been at all times desirous, not only to carry out the special duties of his office, in a kind and fitting spirit, but cordially to co-operate with the Resident Physician in all other details, in which he could be of service. Your Physician is pleased to add, that all his instructions have been efficiently carried out by the Chief Attendants (William Joyce and Lydia Humphrey), both of whom have been influenced by the highest motives in the discharge of their numerous and most important duties. By their example, there have been infused through the Attendants in the Wards, a cheerfulness of demeanour, and earnestness of purpose, and a steady industry which have been productive of good results to the Patients, and have caused those who have been discharged cured from the Asylum, to look back to it with grateful and affectionate remembrances.

The Resident Physician is unwilling to conclude this Report

without referring to a popular error, which has been productive of much mischief and regret to some of the inmates under his care. He alludes to the fancied necessity of inventing a tale by which to decoy the Patient quietly from his home to the Asylum. A Lunatic, for instance, having exalted notions of his rank, wealth, and influence, is told that he is wanted to visit Her Majesty the Queen, and is inveigled into a carriage under that belief; or, as in the case of M. D., a Patient far from home, is told that "she is about to be taken home," and is thus decoyed to the Asylum. This Patient feels the deception and the trick most acutely, and although many months have elapsed since its occurrence, the faintest glimpse of the person who thus deceived her, is always sufficient to arouse her anger, and to make her noisy and disorderly for a whole day. The anguish felt by some minds from this cause is very great, and always retards their cure. The Resident Physician knows at this moment a Relieving Officer, who is greatly disliked even by recovered Patients from this cause; while another officer, who removes more persons to the Asylum than any other individual, is respected by all he brings, from the simple circumstance that he practices no deception, but calmly informs the Patients that he has been instructed to remove them to the Hospital at Mickleover, "because their friends have observed that their nerves have become disordered, and they need a change." Sometimes the Invalid strongly denies this, when he is told, that at all events "he must go," "as these are my instructions, and I must do my duty." In no instance has this truthful proceeding failed, and the Patients are at once placed in a favourable position for treatment. On the contrary, when a Patient who has been deceived, arrives at the Asylum, he is confused and unable to comprehend the object of his removal; its purport having been misrepresented, and no reference whatever made to medical treatment, he is perfectly bewildered, and becomes angry, or sullen, regarding all those around him with suspicion and distrust, and as participators in the plot by which he has been betrayed. These statements are not intended to convey rebuke, but to amend an error. When such a distinguished moralist as Dr. Paley could write, "We may tell a falsehood to a madman for his own advantage," we ought not to expect better ideas from less-informed persons. No *permanent advantage* ever accrued from "telling a falsehood" to any man; but

among the insane, truthfulness in word, and truthfulness in action, are the elements of a Superintendent's power. Once let him deceive a Patient by sheer trick, or intentional falsehood, and his influence over that mind is gone, and justly gone for ever.

The Resident Physician feels much pleasure in expressing his gratitude to the Visiting Justices for the great kindness, which he has uniformly received from them, and especially for the continuous support which they have afforded him in the organization and management of the Asylum.

The Asylum is now organized. May it accomplish a long career of Usefulness and Success. May men be always found to govern it, who will be willing to act up to the Apostolic precept, "Comfort the feeble-minded, support the weak, be patient towards all men."

JOHN HITCHMAN.

THE CHAPLAIN'S REPORT.

GENTLEMEN,

In presenting my Report, as Chaplain of this Asylum, I would carefully avoid any exaggerated statement of the beneficial tendency of religious services upon the minds of the inmates. But, I think, there is reason for believing that they have a decided influence for good.

The season of perfect quiet, which these services afford, is of itself calculated to soothe mental agitation. And the train of thought, which they naturally suggest, or create, is of a kind most adapted to benefit persons, as susceptible as the insane, in their lucid intervals, are to religious impressions. It is scarcely too much to say, that the ministrations of religion greatly mitigate the evils arising from a disordered intellect; if they do not also aid in restoring sanity.

That the Patients themselves appreciate the opportunity of joining in Divine worship, is proved by the fact that their attendance at the Chapel is *voluntary*, and yet *constant*. They look forward to it with pleasure:—they unite in it with all outward marks of devotional feelings. I cannot speak too highly of their uniformly decorous behaviour; which reflects credit alike upon themselves, and those in whose charge they are placed. There has not been, throughout the year, a single interruption to the service from improper conduct.

The opinion I have expressed as to the effect of the Chapel service, has been strongly confirmed by the testimony of one of the Patients—since recovered. In my private visits to her she told me she had experienced the greatest benefit, especially from the reading of the Psalms and the offering up of prayers, in which she could join without mental effort.

In visiting the Patients, and administering the Holy Communion, I have been guided entirely by the judgment of Dr. Hitchman, whose kindness and readiness to advise and assist me, I feel that I ought not to pass by, without most grateful acknowledgment.

I have the honor to be, Gentlemen,

Your obedient servant,

JOSEPH SOWTER.

To the Visiting Committee of the
Derby County Asylum.

Jan. 3, 1853.

DERBY COUNTY LUNATIC ASYLUM.

STATEMENT OF EXPENDITURE.

BUILDINGS, LAND, &c.

	£.	s.	d.
1. Purchases and Exchanges of Land, Conveyancing, Compensation to Tenants, &c.	7,928	18	9
2. Messrs. Thos. and Wm. Mansfield Cooper's Contract for Building, and for Gas Works, Warming and Ventilating Apparatus, and other Engineer's Works	57,371	16	4
3. Farm Buildings, with Fold and Stack Yards, Workshops, and Steward's and Farm Bailiff's Houses	3,624	5	7
4. Boundary Wall, enclosing 32 Acres, Lodge and Gates, Engineer's House, Iron Fencing, Mortuary and Chapel, the Forming and Enclosing Burial Ground with dwarf Wall, and sundry day and other Works and Fittings since the Opening of the Asylum, and beyond the Contract	3,332	6	11
5. Levelling, Soiling, Draining, Enclosing, and Laying out Kitchen Garden, supplying same with Water in Tanks, Stocking the Garden, and Erecting therein Vegetable Washing Room, Seed Room, Potatoe Stores, and a Weighing House and Machine	1,581	19	5
6. Earthwork on the Estate generally, Formation of Roads, Slopes, and Terraces, the Planting and Enclosing a Plantation along North Boundary of Estate, and Turfing, Levelling, Planting, Draining, and completing the Grounds and Estate throughout.....	3,346	5	1
7. Land Surveying, Valuations, Law Charges, and Stamps	939	9	1
8. Premiums to Architects, and Architect's, Engineer's, and Building Surveyor's Commission Charges and Expenses.	5,140	15	6
9. Clerk of Works and Police	842	3	1
Building	£84,107	19	9

ESTABLISHMENT CHARGES.

	£.	s.	d.
10. Furniture, &c.			
Fittings, Furniture, Bedsteads, &c.	4,272	2	1
Bedding and Linen Drapery.....	1,522	14	7
Ironmongery, Cutlery, &c.	356	17	4
Earthenware, Turnery, and Sundries	257	12	9
11. Clothing, Boots, Shoes, &c.....	1,562	4	5
12. Incidental Charges.			
Coals and Coke	876	10	8
Provisions and Stores	1,872	11	1
Medicines, Surgical Instruments, &c.	47	1	6
Salaries and Wages	2,200	7	10
Printing, Advertising, Stationery, Books, Postage, and Carriage	239	18	6
Rates and Tithes	83	8	11
Miscellaneous Expenses	453	2	6
13. Farm.			
Farming Implements, Saddlery, &c.	339	10	10
Live Stock.....	204	13	6
Establishment	14,288	16	6
Total Expenditure	£98,396	16	3

STATEMENT OF RECEIPTS
FOR THE
MAINTENANCE OF PATIENTS
FROM THE
OPENING OF THE ASYLUM,

August 21st, 1851, to the 31st December, 1852; viz.—

From Unions and Parishes in Counties and Boroughs contributing to the Asylum.

	£	s.	d.	£	s.	d.
Ashbourne Union	176	2	7			
Ashby-de-la-Zouch Union	95	2	2			
Bakewell Union	360	7	4			
Belper Union	273	8	2			
Basford Union	165	17	1			
Burton-upon-Trent Union	70	15	1			
Chesterfield Union	365	19	7			
Derby Union.....	606	16	0			
Ecclesall Bierlow Union	37	7	4			
Glossop Union	76	15	1			
Hayfield Union.....	43	8	5			
Loughborough Union	5	14	10			
Mansfield Union	57	19	0			
Rotherham Union	13	9	1			
Shardlow Union	166	14	1			
				2,515	15	10
County Treasurer	28	9	0	28	9	0
<i>In other Counties and Boroughs not contributing.</i>						
Bingham Union	9	18	10			
Cheadle Union	1	2	3			
Chester Union	11	18	2			
Coventry Union	10	5	8			
Carlisle Union	7	8	8			
East Retford Union	4	7	5			
Nottingham Union	148	11	5			
Newark Union	13	19	4			
St. James's, London	16	7	5			
				223	19	2
For Private Patients				12	10	0
Total.....				£2,780	14	0

RETURN OF THE NUMBER OF ARTICLES OF CLOTHING, MADE UP BY THE FEMALE
PATIENTS TO THE 31st DECEMBER, 1852.

Aprons.	463	Blouses.	8	Bonnets.	24	Bolster Cases.	450	Boots.	21	Caps.	259	Cloaks.	6	Curtains.	54	Chemise.	225	Ditto Flannel.	75	Drawers.	50	Gowns.	231	Ditto night.	66	Handkerchiefs.	712	Mattresses.	11	Petticoats.	177	Ditto Flannel.	91	Pillows.	12	Ditto Cases.	68	Shoes.	14	966	Sheets.	355	Shirts.	186	Ditto Flannel.	60	Stays.	24	Shawls.	65	Table Cloths.	250	Towels.	
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Number of Articles Repaired, 2,389.

APPENDIX.

ABSTRACT OF PORK, VEAL, MILK, AND VEGETABLES
SUPPLIED TO THE HOUSE FROM THE FARM AND
GARDEN.

DURING PART OF 1851.

Pork.....	2,292 $\frac{1}{4}$ lbs.
Veal	123 $\frac{1}{4}$ lbs.
Milk.....	659 gallons.
Potatoes	78 cwt. 1 qr. 18 lbs.
Onions	178 $\frac{1}{2}$ lbs.
Carrots.....	415 lbs.
Cabbages.....	1,460 lbs.
Turnips	157 lbs.

1852.

Pork.....	4,281 $\frac{1}{2}$ lbs.
Veal	327 lbs.
Milk	3,352 gallons.
Potatoes	270 cwt. 2 qrs. 20 lbs.
Onions.....	1,271 lbs.
Carrots.....	4,589 lbs.
Cabbages	14,158 lbs.
Turnips	318 lbs.

N.B.—Some of the potatoes used were purchased during the growth of the home produce. Six hundred bushels were subsequently raised, but one-third either were, or became, affected with the “disease” during the early winter-months of 1852.

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